

UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF NEW YORK

PRO BONO FUND VOUCHER
AND REQUEST FOR REIMBURSEMENT

I, Ryan G. Files, duly appointed as counsel pro bono to
represent David ("DeAndre") Williams in the matter of
Williams v. Fischer et al

Civil Action No. 9:11-CV-379, hereby request reimbursement pursuant to Local Rule 83.3
for expenses incurred in the representation of my pro bono client in the amount of \$ 526.19.


I certify that the expenses, a detailed copy of which are attached hereto, are reasonable
and necessary. I further understand that absent prior approval of the court, cumulative expenses
in this matter will not exceed \$2,000.00.

Dated: December 20, 2021.

Counsel Pro Bono (Signature): 

The above application of counsel pro bono is fair and reasonable and payment is
requested from the Northern District of New York's Pro Bono Fund.

Dated: 1/9/2022.

Presiding Judge (Signature): 

IT IS SO ORDERED.

Dated: 1/18/22.


Chief U.S. District Judge



**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF NEW YORK**

Pro Bono Authorization Request

Attorney(s) Name: Ryan G. Files, Esq.
Case Number/Party Represented: 9:11-cv-00379 / DeAndre Williams (Plaintiff)

☐ **Authorization Request for expenses in excess of \$500.00**

Explanation:

☐ **Authorization Request for voucher in excess of \$2,000.00**

Explanation:

☒ **Travel Authorization Request**

Provide justification for travel and a list of estimated travel expenses:

Travel to and from office in Fayetteville, NY to Wende Correctional facility for meetings with client, and to Court for trial. Total: 864 miles (see travel expenses list).

The above Authorization Request for travel expenses, expenses in excess of \$500.00 or voucher in excess of \$2,000.00 is hereby APPROVED.

Presiding Judge (Signature): _____

Dated: _____

*Please email Authorization Request to the "Courtroom Deputy" of presiding Judge

*A copy of the approved authorization must be attached to your pro bono voucher.

**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF NEW YORK**

Pro Bono Expense Voucher

Attorney(s) Name: Ryan G. Files, Esq.

Law Firm Name: Gattuso & Ciotoli, PLLC

Mailing Address of Law Firm: 7030 East Genesee Street

City/State/Zip: Fayetteville, NY 13066

I hereby request payment be made for Pro Bono services performed in:

Case Number: 9:11-cv-00379

Party Represented: DeAndre Williams (Plaintiff)

Dates of Service: From: 2/5/2021 To: 12/10/2021

Rates Effective October 2021 through September 2022
See mileage rates for Northern District of New York

| GSA PER DIEM RATES: | Lodging | Meals |
|----------------------------|----------------|--------------|
| (Recommended) | | |
| Syracuse | \$ 101 | \$ 64 |
| Albany | \$ 114 | \$ 69 |
| Utica | \$ 96 | \$ 59 |
| Binghamton | \$ 101 | \$ 64 |
| Plattsburgh | \$ 96 | \$ 59 |

*Only actual expenses may be claimed

**GRAND TOTAL
VOUCHER AMOUNT**

\$ 526.19

Finance Audit MC Date: 12/20/2021

I certify that I rendered the services described herein, that said services are fair and reasonable and payment is requested from the Northern District of New York's Pro Bono Fund. I further understand that absent prior approval of the Court, cumulative expenses in this matter will not exceed \$2,000.00.

Attorney Signature:  **Date:** 12/20/2021

*Must provide receipts if your expenses include airfare, lodging, rental car and expenses \$50.00 and over.

*Please submit your voucher via ECF using "Motion for Disbursement of Funds" event.

*If you have an expense over \$500.00, travel expenses or your voucher exceeds \$2,000.00, please fill out the attached Authorization Request Form.

Pro Bono Other Expenses

*Any expenses in excess of \$500.00 should receive the Court's prior approval. Please see guidelines for further details.

Attorney(s): Ryan G. Files, Esq.

| DATE | EXPENSE TYPE | NOTES/PURPOSE | TOTAL EXPENSE AMOUNT |
|----------|--|---------------------|----------------------|
| 10/29/21 | Purchase binders, dividers, and labels for exhibits. | Supplies for trial. | \$ 42.35 |
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| TOTAL: | | | \$ 42.35 |